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Date: June 7, 2006

## FACSIMILE COVER LETTER

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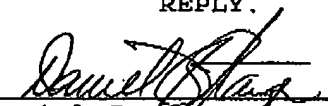
To: Examiner TUAN T. DINH  
Group Art Unit 2841, USPTO

From: Mr. Daniel J. Stanger  
MATTINGLY, STANGER, MALUR & BRUNDIDGE, P.C.

Re: USSN 10/733,289  
Attorney Docket No.: H-1126

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following listed documents are being facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below:

PTO-1083 TRANSMITTAL; AND  
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Daniel J. Stanger  
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Form PTO-1083

Patent

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In RE application of S. KONISHI et al.

Case Docket No. H-1126

**JUN 07 2006**

Serial No.: 10/733,289

Group Art Unit: 2841

Filed: December 12, 2003

For: SEMICONDUCTOR MODULE

Examiner: T. T. DINH

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

June 7, 2006

Sir:

Transmitted herewith is an Amendment in the above-identified application.

Small entity of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.

☒ A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.  
No additional fee is required.

The fee has been calculated as shown below:

(Col. 1)			(Col. 2)		(Col. 3)	SMALL ENTITY		OR	OTHER THAN A SMALL ENTITY	
	Claims Remaining After Amendment	Minus	Highest No. Previously Paid For		Present Extra	Rate	Additional Fee		Rate	Additional Fee
Total	1	Minus	** 30	=	0	X 25	\$		X 50	\$ 0
Indep.	7	Minus	*** 3	=	0	X 100	\$		X 200	\$ 0
First presentation of Multiple Dependent Claims						X 180	\$		X 360	\$
						Total	\$		Total	\$ 0

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in col. 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior Amendment or the number of claims originally filed.

Please charge my Deposit Account No. 50-1417 in the amount of \$\_\_\_\_\_.

A Credit Card Payment Form in the amount of \_\_\_\_\_ is attached.

☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayments to Deposit Account No. 50-1417.

Any filing fees under 37 CFR 1.16 for the presentation of extra claims.

Any patent application processing fees under 37 CFR 1.17.

Any Extension of Time fees that are necessary, which are hereby requested if necessary.

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Tel: (703) 684-1120  
Fax: (703) 684-1157By: Daniel J. Stanger, Reg. No. 32,846  
Attorney for Applicant(s)

Date: June 7, 2006

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H-1126

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

S. KONISHI et al

Serial No. 10/733,289

Group Art Unit: 2841

Filed: December 12, 2003

Examiner: Tuan T. DINH

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REPLY

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

June 7, 2006

Sir:

In Reply to the Office Action mailed March 7, 2006,  
please amend the above application as set forth below.